

WALTER B. JONES
3D DISTRICT, NORTH CAROLINA

INSIDE MAIL

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COMMITTEES:
COMMITTEE ON ARMED SERVICES
COMMITTEE ON FINANCIAL SERVICES

Congress of the United States
House of Representatives
Washington, DC 20515-3303

LEGISLATIVE RESOURCE CENTER

2009 OCT -6 PM 12:04

U.S. HOUSE OF REPRESENTATIVES

October 1, 2009

Clerk of the House
Legislative Resource Center
B-106 Cannon House Office Building
Washington, D.C.

Dear Madam Clerk:

MC

Please find attached an amended copy of Schedule III of my Calendar Year 2008 Financial Disclosure Statement. While there are no material changes, the amended schedule more precisely clarifies the values of and incomes from the investments that my wife and I hold.

Sincerely,

Walter B. Jones

Walter B. Jones
Member of Congress

UNITED STATES HOUSE OF REPRESENTATIVES
CALENDAR YEAR 2008 FINANCIAL DISCLOSURE STATEMENT

Form A
 For use by Members, officers, and employees

INSIDE MAIL

U.S. HOUSE CENTER

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U.S. HOUSE OF REPRESENTATIVES

Name: WALTER BEAMAN 501 53 Daytime Telephone: 202-225-3415

Filer Status	<input checked="" type="checkbox"/> Member of the U.S. House of Representatives	State: <u>NC</u> District: <u>05</u>	<input type="checkbox"/> Officer or Employee	Employing Office:	Termination Date:
Report Type	<input type="checkbox"/> Annual (May 15)	<input checked="" type="checkbox"/> Amendment	<input type="checkbox"/> Termination		

A \$200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes <input type="checkbox"/> No <input type="checkbox"/>	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes <input type="checkbox"/> No <input type="checkbox"/>
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes <input type="checkbox"/> No <input type="checkbox"/>	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$335 from one source)? If yes, complete and attach Schedule VII.	Yes <input type="checkbox"/> No <input type="checkbox"/>
III. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes <input type="checkbox"/> No <input type="checkbox"/>
IV. Did you, your spouse, or a dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes <input type="checkbox"/> No <input type="checkbox"/>	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes <input type="checkbox"/> No <input type="checkbox"/>
V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes <input type="checkbox"/> No <input type="checkbox"/>	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes <input type="checkbox"/> No <input type="checkbox"/>
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Standards of Official Conduct.	Yes <input type="checkbox"/> No <input type="checkbox"/>

* AMENDED SCHEDULE III ONLY

Page 1 of 2

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Continuation Sheet (if needed)

Page 2 of 4

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